

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		7/22/94
O.I.P.E. CLASSIFIER		5	7-26-99
FORMALITY REVIEW		100574	8-4-97

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	1	1	✓
2	2	2	✓
3	3	3	✓
4	4	4	✓
5	5	5	✓
6	6	6	✓
7	7	7	✓
8	8	8	✓
9	9	9	✓
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12	12	12	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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**BEST AVAILABLE COPY** more than 150 claims or 10 actions  
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